

Minutes
Traumatic Brain Injury Advisory Council
Dorothea Dix Campus, Royster Building
Raleigh, North Carolina
July 21, 2005

Members Present

David Atkinson	Stephen Hooper	Sharon Rhyne
Sandra Farmer	Marilyn Lash	Holly Riddle
David Forsythe	David Mills	Robert Seligson
Betty Gardner	Charles Monnett III	Elsie Siebelink
Bob Gauldin	Brenda Motsinger	
Tonia Harrison	Jo Perkins	

Members Absent

Spencer Clark	Layla Mabe	Jamesa Selleck
Martin Foil	Ila Nofzinger	Jack St. Clair
Lynn Freeman	Patrick O'Brien	Steven Strobel
Al Hart/sent rep. (Paula Hart)	Carol Robertson	

Others Present

Pat Beuell	Grey Powell	Jean Slosek
Beth Callahan	Kay Sanford	Flo Stein
Janice Petersen	Sharon Schiro	Jessica Trembly

The meeting was called to order by Sharon Rhyne, Chair, at 10:05 a.m. She welcomed all Council members and guests.

Review and Approval of Minutes:

Motion: A motion was made by Mr. Mills, seconded by Mr. Forsythe, and unanimously approved that:

RESOLVED: The minutes from the March 15, 2005 council meeting be approved, with one correction (that Ms. Riddle was absent from the meeting).

Ms. Rhyne asked that the minutes reflect a change that should be recorded for the January 11, 2005 minutes, previously approved. The definition in those minutes for acquired brain injury was inaccurately written, failing to reflect the actual motion that day. The motion that day was consistent with the definition that was then sent out in Ms. Rhyne's January 13, 2005 memo that sought additional votes. It read as follows and should have been included in the minutes as such:

An acquired brain injury shall be a trauma insult to the brain caused by (1) an external physical force, including exposure to thermal, mechanical, electrical or chemical energy or absence of essentials such as heat or oxygen; or (2) an internal event secondary to disease, infection or cerebrovascular accident; or anoxia/hypoxia or ischemic events. An acquired brain injury is not hereditary, congenital or degenerative.

Comments from the Division of MH/DD/SAS:

Ms. Rhyne introduced Ms. Janice Petersen, Team Leader for the Prevention and Early Intervention Team within the Community Policy Section of the Division of Mental Health, Developmental Disabilities, and Substance Abuse Services (MH/DD/SAS). Ms. Petersen announced to the Council that Ms. Beth Callahan, staff to the Council, had resigned effective in early August. Ms. Petersen thanked Ms. Callahan for her work and devotion to both the Council and the brain injured population of North Carolina and their families. Ms. Petersen emphasized that the Division of MH/DD/SAS is in full support of the Council and its mission.

Council Updates:

Ms. Rhyne formally thanked Ms. Lash for agreeing to serve as Vice Chair of the Council.

Ms. Rhyne informed the Council that she and the staff are working to have replacements named for a number of council members: Dr. Strobel, Dr. Good, Dr. Turner, and probably Ms. Mabe.

Ms. Rhyne also informed council members that per their request, on June 8, 2005 a letter was sent to Ms. Flo Stein, Chief of Facility Policy Management, asking for more staff support for the Traumatic Brain Injury (TBI) program.

Burden of TBI in NC, 1999-2003:

Ms. Rhyne introduced Ms. Kay Sanford, an epidemiologist with the Division of Public Health. Ms. Sanford presented a PowerPoint slideshow illustrating various TBI data for North Carolina.

Ms. Sanford commented that the ethnic statistics are changing rapidly since the Hispanic and Latino population have increased significantly every year since 2000. She also pointed out that many times the race and ethnicity of an individual are filled out by the funeral director so the accuracy of the ethnic data is somewhat questionable.

Dr. Schiro asked Ms. Sanford if it was possible for a breakdown of types of reimbursement involved with the TBI injuries presented by Ms. Sanford. Dr. Schiro was particularly interested in Medicare/Medicaid monies. Ms. Sanford indicated this information was available.

Ms. Rhyne asked that the Prevention and Surveillance Committee review the data and translate it into a one page narrative for future use when approaching the legislature, for example, for funding.

Ms. Rhyne introduced Dr. Sharon Schiro, director of the North Carolina Trauma Registry. Ms. Rhyne felt it would be helpful for the Council to be aware of the TBI data available from the registry and to consider what additional data might be useful for inclusion to provide a more complete picture of the state's brain injuries. The state may not need a separate brain injury registry as it may be able to build on what is available through the current trauma registry. The Council members asked that they receive a trauma center map. Dr. Hooper asked that the Council look at socio-economic information in this data. He also asked if the data indicated whether a person had previously sustained a TBI, which it does not.

Comments from Ms. Flo Stein:

Ms. Rhyne introduced Ms. Flo Stein, Chief of Community Policy Management in the Division of MH/DD/SAS. Ms. Stein informed the Council that she and the Division are in full support of the Council and its mission. She further told council members that she and the Division will assist the Council in submitting items to the Secretary of the Department of Health and Human Services (DHHS) when appropriate. Anything going to the legislature must first go through the Secretary of DHHS, then the Governor.

Ms. Stein stated that her Division will be providing more staff support to the Council, with Ms. Christina Carter providing staff support in the interim between Ms. Callahan's departure and her replacement. Ms. Perkins suggested that an "agency person" be assigned to each committee. Ms. Stein informed the Council she will assign a staff person to each Council committee. She also suggested that the Council form an Executive Committee to meet with her as soon as it is formed.

Ms. Stein commented that the Division believes the current service definitions are adequate; however, if the Council can provide data that would suggest otherwise that the Division would reconsider this.

Ms. Rhyne asked about the Council's proposed change in the N.C. General Statute 111C-3(12a) that defines developmental disability. This would change the statute to reference an acquired brain injury. Ms. Stein replied that she believes this is a good recommendation, but a study must be conducted in order to move forward with changing the statute. Also, this change would require a large amount of funding to account for additional patients who would qualify.

Ms. Stein commented that in order to move toward a Traumatic Brain Injury waiver more work needs to be done, particularly defining what services the waiver would address.

Ms. Stein informed council members that the TBI state plan needs to be divided into short and long term objectives. Its wording also needs to be revised so set demands (not within the authority of the Council) are not made of various Divisions. She also suggested that the Council invite key persons to participate in Council activities.

Ms. Riddle asked Ms. Sanford and Dr. Schiro if they could provide the Council with follow up information on those with brain injuries. Where are they now? What services are they currently receiving?

Ms. Riddle added that the Council should host a conference and invite national experts in TBI. She also suggested that the Council develop handouts, etc. in order to educate the legislators.

Ms. Rhyne asked Ms. Stein whether the current TBI funding through the Division of MH/DD/SAS is distributed in line with the TBI state plan priorities. She was not sure. Ms. Lash then asked that someone from the Division of MH/DD/SAS come to the next Council meeting to provide more information on who, how many, and where persons with TBI's are being served using this money.

Ms. Riddle suggested that the Council compare the Council's TBI state plan with the Division of MH/DD/SAS's state plan.

Update on National Association of State Head Injury Administrators Regional Meeting:

Ms. Lash reported that the southeastern states with the most comprehensive TBI programs have mechanisms for surveillance, registries, and trust funds. She added that many of these states have a broad definition of brain injury using the term acquired rather than traumatic. None of these states have consequently narrowed the definition due to excessive costs or demands for services. These successful states also have a well developed state plan that is used as a blueprint for policy and planning and is updated regularly. Florida and Georgia have models for brain injury registries that link identification of persons with brain injuries with service provision. Ms. Lash stated that it is more efficient to integrate brain injury data into current registries rather than developing two separate registries. South Carolina has a comprehensive surveillance program that includes a methodology for identifying the severity of brain injury and its impact on services needs which they are willing to discuss with NC and other states. Ms. Lash will ask Anna King to come talk to the Council about trust funds.

Mr. Mills stated that he felt it might be a disadvantage to have numerous state employees on the Council because they are barred from actively lobbying on behalf of the Council. Ms. Rhyne replied that she has begun working on the identification of additional council members who are not state employees. Ms. Motsinger suggested that the Council have senators or representatives serve as members. Ms. Sanford suggested that the Council send various senators and representatives copies of the minutes from each meeting.

Approval of Bylaws:

Ms. Rhyne asked council members for any further input on the proposed final version of the TBI Council Bylaws that Mr. Monnett had helped staff complete.

Motion: A motion was made by Ms. Perkins, seconded by Mr. Forsythe and unanimously approved that:

RESOLVED: The July 7, 2005 bylaws be accepted with two minor corrections.

Committee Reports:

-Prevention Committee: Ms. Motsinger asked that the Prevention Committee be renamed the Prevention and Surveillance Committee. The Prevention (and Surveillance) Committee met on May 19 and on June 14. Ms. Motsinger further reported that the Committee needs additional members. The committee also made some changes to its charge. Ms. Motsinger will forward the updated charge to Ms. Rhyne

-Public Awareness Committee: Ms. Harrison suggested that the Public Relations Committee and the Prevention and Surveillance Committee work together. Ms. Lash stated she will email the committee members to ask them about merging with the Prevention and Surveillance Committee.

-Health Services & Service Delivery Committees: Ms. Perkins reported that she has compiled notebooks for committee members. The committee will meet on August 9, 2005.

-Legislative Committee: Ms. Farmer reported that the committee is looking into trust funds.

Other Business:

Ms. Rhyne asked that each state agency council member investigate and report back on any brain injury definitions (acquired, traumatic, etc.) being utilized within their respective sections. She asked that these definitions be brought in writing to the next meeting.

The next meeting will be September 13, 2005.

With no further business, the meeting adjourned at 2:05 p.m.